

Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission?::	None
Computer Readable Form (CRF)::	No
Number of copies of CRF::	0
Title::	PTX3 AS AN EARLY PROGNOSTIC INDICATOR OF CARDIOVASCULAR AND CEREBROVASCULAR PATHOLOGIES
Attorney Docket Number::	2503-1036-1
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	4
Small Entity?::	No
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Gov't Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: ITALY
Status:: Full Capacity
Given Name:: ROBERTO
Middle Name::
Family Name:: LATINI
City of Residence:: MILANO
State or Province of Residence::
Country of Residence:: ITALY
Street of Mailing Address:: VIA ERITREA, 62

City of Mailing Address:: MILANO
State or Province of Mailing Address::
Country of Mailing Address:: ITALY
Postal or Zip Code of Mailing Address:: 20157

Applicant Authority Type:: Inventor
Primary Citizenship Country:: ITALY
Status:: Full Capacity
Given Name:: GIUSEPPE
Middle Name::
Family Name:: PERI
City of Residence:: MILANO
State or Province of Residence::
Country of Residence:: ITALY
Street of Mailing Address:: VIA ERITREA, 62

City of Mailing Address:: MILANO
State or Province of Mailing Address::
Country of Mailing Address:: ITALY
Postal or Zip Code of Mailing Address:: 20157

Applicant Authority Type:: Inventor
Primary Citizenship Country:: ITALY
Status:: Full Capacity
Given Name:: ALBERTO
Middle Name::
Family Name:: MANTOVANI
City of Residence:: MILANO
State or Province of Residence::
Country of Residence:: ITALY
Street of Mailing Address:: VIA MANGIAGALLI, 31

City of Mailing Address:: MILANO
State or Province of Mailing Address::
Country of Mailing Address:: ITALY
Postal or Zip Code of Mailing Address:: 20133

Applicant Authority Type:: Inventor
Primary Citizenship Country:: ITALY
Status:: Full Capacity
Given Name:: ALDO P.
Middle Name::
Family Name:: MAGGIONI
City of Residence:: FIRENZE
State or Province of Residence::
Country of Residence:: ITALY
Street of Mailing Address:: VIA LAMARMORA, 34

City of Mailing Address:: FIRENZE
State or Province of Mailing Address::
Country of Mailing Address:: ITALY
Postal or Zip Code of Mailing Address:: 50121

Correspondence Information

Correspondence Customer Number:: 000466

Representative Information

Representative Customer Number::	000466
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Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	Non-Provisional of	60/422,478	10/31/02

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::

Assignment Information

Assignee Name::

Street of Mailing Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::